

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Amnon SINTOV, et al.
Title: TRANSDERMAL DRUG DELIVERY SYSTEM
Appl. No.: 10/517,844
International Filing Date: June 16, 2003
371(c) Date: December 15, 2004
Examiner: Hasan Syed AHMED
Art Unit: 1615
Confirmation Number: 9004

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated February 23, 2007, and in the Advisory Action dated August 3, 2007, finally rejecting Claims 1-12.

☒ Applicant claims small entity status.

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

☒ Notice of Appeal Fee

☒ To be paid as detailed below

The required fees are calculated below:

[X]	Notice of Appeal Fee	\$500.00
[X]	Extension for response filed within the third month:	\$1,020.00
[X]	Extension Already Obtained for second month:	\$450.00
	FEE TOTAL:	\$1,070.00
[X]	Small Entity Fees Apply (subtract ½ of above):	\$535.00
	TOTAL FEE:	\$535.00

A credit card payment form in the amount of \$535.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16, 1.17 and 41.20, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

August 21, 2007

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By

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